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PTO/SB/21 (6-98)  
Approved for use through 09/30/2000. OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/307,511	<b>RECEIVED</b> <b>JUL 15 1999</b> <b>Group 3700</b>
	Filing Date	May 7, 1999	
	First Named Inventor	G. Bourdon	
	Group Art Unit	3761	
	Examiner Name	V. Srivastava	
Total Number of Pages in This Submission	Attorney Docket Number	PBLMD-51494	

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response (Supplementary Prel.)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	- Postcard
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<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	FULWIDER PATTON LEE & UTECHT, LLP
Signature	Ronald E. Perez
Date	July 9, 1999

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I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: <input type="text"/>		
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09 = 307,511

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## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

PBLMD-51494

JUL 15 1999

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

Group 3700

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

RATE	FEE
	\$ _____
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

RATE	FEE
	\$ _____
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	* 10	Minus ** 20
Independent (37 CFR 1.16(b))	* 3	Minus *** 3	= -0-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

RATE	ADDITIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	-0-

(Column 1)

(Column 2)

(Column 3)

TOTAL  
ADDIT. FEETOTAL  
ADDIT. FEE

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	*	Minus **
Independent (37 CFR 1.16(b))	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

RATE	ADDITIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

(Column 1)

(Column 2)

(Column 3)

TOTAL  
ADDIT. FEETOTAL  
ADDIT. FEE

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	*	Minus **
Independent (37 CFR 1.16(b))	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

RATE	ADDITIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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